70

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

Please type a plus sign (+) inside this box

Attorney Docket No. 14485RRUS01U

First Inventor Peter W. Wenzel

Title HOME AGENT REDUNDANCY IN A CELLULAR SYSTEM

ET162571663US Express Mail Label No. (Only for new nonprovisional applications under 37 CFR 1.53(b)) Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: **Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission 2. See 37 CFR 1.27. (if applicable, all necessary) (preferred errengement set forth below) X Computer Readable Form (CRF) - Descriptive title of the invention b. Specification Sequence Listing on: Cross Reference to Related Applications i. CD-ROM or CD-R (2 copies); or - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, ii. 🖂 paper or a computer program listing appendix Statements verifying identity of above copies Background of the Invention - Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) - Detailed Description Assignment Papers (cover sheet & document(s)) 9. - Claim(s) Power of 37 CFR 3.73(b) Statement - Abstract of the Disclosure (when there is an assignee) Attorney English Translation Document (if applicable) 4. [X] Drawing(s) (35 U.S.C. 113) [Total Sheets Copies of IDS Information Disclosure 5. Oath or Declaration [Total Pages Citations Statement (IDS)/PTO-1449 Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) 13. Preliminary Amendment a. Return Receipt Postcard (MPEP 503) b. (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) Nonpublication Request under 35 U.S.C. 122 named in the prior application, see 37 CFR (b)(2)(B)(i). Applicant must attach form PTO/SB/35 1.63(d)(2) and 1.33(b). or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.:_ Prior application information: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Correspondence address below (fissia Casteria No. et Alexi ber eeto label hard) Bruce E. Garlick Name P.O. Box 160727 Address Austin Texas Zip Code 78716-0727 City State **United States** (512) 264-8816 (512) 264-3735 Country Telephone Fax Bruce E. Garlick 36,520 Registration No. (Attorney/Agent) Name (Print/Type) Oct. 17, 2001 Signature Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
OUnder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

14485RRUS01U

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER T	
NUMBER FILED					NUMBER EXTRA			RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))				<u>.</u>					s	OR		<u>\$_740</u>
TOTAL CLAIMS 23 minus 2				s 20 =	*	3	li	x \$ =	\$	OR	x <u>\$ 18</u> =	\$ 54
INDI	EPENDENT CLA CFR 1.16(b))	AIMS 3	min	us 3 = *		0		x <u>\$_</u> =	\$	OR	x <u>\$84</u> =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+=		OR	+=	
* If the difference in column 1 is less then zero, enter "0" in column 2								TOTAL	\$	OR	TOTAL	\$ 794
9	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL E	NTITY	OR	OTHER T	I
^{E L} AMENBARATAL		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	GHEST IMBER IOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	OR OR OR	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**		=		x \$=			x \$=	
	Independent (37 CFR 1.16(b))	*	Minus	***		=		x=			x=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					(37 CFR 1.16(d))		+=		OR	+=	
Ţ	(Column 1) (Column 2) (Column						AD	TOTAL DIT. FEE		ORA	TOTAL DDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	**************************************	NU PREV	GHEST IMBER /IOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	OR OR OR	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**		=		x \$=			x \$=	
	Independent (37 CFR 1.16(b))	*	Minus	***		=	1[x=			x=	
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					(37 CFR 1.16(d))]	+=		OR	+=	
(Column 1) (Column 2) . (Column 3)								TOTAL DDIT. FEE		OR _A	TOTAL DDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NI PREV	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**		=		x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	*	Minus	***		=]	x=		OR OR	x=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+=		OR	+=	
		mn 1 is less than the	TOTAL ADDIT. FEE		OR	TOTAL DDIT. FEE						

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".